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PTO/SB/17 (12-04v2)

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Complete if Known

Effective on 12/08/2004. Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4814).		Application Number 10/564589	
Fee Transmittal For FY 2005		Filing Date January 13, 2006	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor Eric Fassbau	
TOTAL AMOUNT OF PAYMENT (S) 130.00		Examiner Name Not Yet Assigned	
		Art Unit N/A	
		Attorney Docket No. 05129-00117-US	

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 03-2775 Deposit Account Name: Connolly Bove Lodge & Hutz LLP				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
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2. EXCESS CLAIM FEES

Fee Description: 130.00 DA

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
- 20 =	x	=	=	Fee (\$)
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50	(round up to a whole number) x	=	Fee Paid (\$)

4. OTHER FEE(S)	Fee (\$)	Fee Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)		130.00
Other (e.g., late filing surcharge): 1051 Surcharge-Late oath or declaration		

SUBMITTED BY	Signature: <i>Ashley I. Polzner</i>		Registration No. (Assignee/Agent)	35,648	Telephone	(302) 658-9141
Name (Print/Type)			Date			3/23/06

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Adjustment date: 04/21/2006 PBOOKER
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